| Fill in this information to identify your case: | | | | | |
|---|---|--|--|--|--|
| Debtor 1 | Ann W. Chan | | | | |
| Debtor 2 (Spouse, if filing) | | | | | |
| United States B | ankruptcy Court for the: District of New Jersey | | | | |
| Case number (if known) | 3:25-bk-10182 | | | | |

| Chec | Check as directed in lines 17 and 21: | | | | | | |
|------|--|--|--|--|--|--|--|
| | According to the calculations required by this Statement: | | | | | | |
| | 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). | | | | | | |
| | 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3). | | | | | | |
| | 3. The commitment period is 3 years. | | | | | | |
| | 4. The commitment period is 5 years. | | | | | | |

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - ☐ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

| | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse |
|---|---|-------------------|--|
| Your gross wages, salary, tips, bonuses, overtime, a payroll deductions). | and commissions (before all | \$\$ | \$12,766.00 |
| Alimony and maintenance payments. Do not include payments. Do not include payments. Output Description: | payments from a spouse if | \$ | \$ |
| 4. All amounts from any source which are regularly pai of you or your dependents, including child support. from an unmarried partner, members of your household, and roommates. Do not include payments from a spouse you listed on line 3. | Include regular contributions , your dependents, parents, | \$0.00 | \$0.00_ |
| 5. Net income from operating a business, profession, or farm | Debtor 1 | | |
| Gross receipts (before all deductions) | \$ <u>0.00</u> | | |
| Ordinary and necessary operating expenses | -\$ <u>0.00</u> | | |
| Net monthly income from a business, profession, or farm | n \$ 0.00 Copy here -> | \$ | \$0.00_ |
| 6. Net income from rental and other real property | ebtor 1 | | |
| Gross receipts (before all deductions) | \$ <u>0.00</u> | | |
| Ordinary and necessary operating expenses | -\$ <u>0.00</u> | | |
| Net monthly income from rental or other real property | \$0.00 Copy here -> | \$ | \$ |

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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3:25-bk-10182

Case number (if known)

Column A Column B Debtor 1 Debtor 2 or non-filing spouse 7. Interest, dividends, and royalties 0.00 0.00 0.00 0.00 8. Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you\$ ___ For your spouse.....\$ 0.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. 0.00 0.00 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act: payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism, or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 2.127.84 12,766.00 14,893.84 Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 14,893.84 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. П You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 14,893.84 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 14,893.84 15a. Copy line 14 here=>.....

Ann W. Chan

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| Debte | or 1 | Ann | W. Chan | | Case number (if known) | 3:25-bk-10 | 182 |
|-------|---------------------------|-----------------|---|---|--|--|---|
| | | М | ultiply line 15a by 12 (the number of months ir | n a year). | | | x 12 |
| | 15 | b. Th | ne result is your current monthly income for th | e year for this part of t | he form. | | \$178,726.08 |
| 16 | . Cal | culate | the median family income that applies to | you. Follow these ste | ps: | | |
| | 16a | . Fill ir | n the state in which you live. | NJ | | | |
| | 16b | . Fill ir | n the number of people in your household. | 3 | | | |
| | | To fi | n the median family income for your state and nd a list of applicable median income amount uctions for this form. This list may also be ava | s, go online using the | link specified in the separate | | \$ <u>127,415.00</u> |
| 17 | | | he lines compare? | | | | |
| | 17a | . L | Line 15b is less than or equal to line 16c. O U.S.C. § 1325(b)(3). Go to Part 3. Do NO | | | | |
| | 17b | . 🗵 ı | Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14 a | ulation of Your Dispo | , check box 2, <i>Disposable incor</i> psable Income (Official Form | me is determir 122C-2). On l | ed under 11 U.S.C. § ine 39 of that form, copy |
| Par | t 3: | Ca | Iculate Your Commitment Period Under 11 | U.S.C. § 1325(b)(4) | | | |
| 18. | Cop | у уоц | ır total average monthly income from line | l1 | | \$ | 14,893.84 |
| 19. | that | calcu | ne marital adjustment if it applies. If you are lating the commitment period under 11 U.S.C opy the amount from line 13. | married, your spouse . § 1325(b)(4) allows y | e is not filing with you, and you o you to deduct part of your spou | contend se's | |
| | | - | e marital adjustment does not apply, fill in 0 on | line 19a. | | -\$ | 0.00 |
| | | | | | | | |
| | 19b | Sub | tract line 19a from line 18. | | | | \$14,893.84_ |
| 20. | Cal | culate | your current monthly income for the year | . Follow these steps: | | | |
| | 20a | Copy | y line 19b | | | | \$ 14,893.84 |
| | | Mult | ply by 12 (the number of months in a year). | | | | x 12 |
| | 20b | . The | result is your current monthly income for the y | ear for this part of the | form | | \$ <u>178,726.08</u> |
| | 20c | Copy | γ the median family income for your state and | size of household from | ท line 16c | | \$ <u>127,415.00</u> |
| | 21. | How | do the lines compare? | | | | |
| | | | Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4. | se ordered by the cou | ırt, on the top of page 1 of this f | form, check bo | x 3, The commitment |
| | | | Line 20b is more than or equal to line 20c. Ut commitment period is 5 years. Go to Part 4. | nless otherwise ordere | ed by the court, on the top of pa | ge 1 of this fo | rm, check box 4, <i>The</i> |
| Par | By s (/s/ At Sig Date | Ann Wanature Ja | gn Below g here, under penalty of perjury I declare that W. Chan Chan e of Debtor 1 nuary 28, 2025 I / DD / YYYY cked 17a, do NOT fill out or file Form 122C-2 | | | | |
| | If yo | u che | cked 17b, fill out Form 122C-2 and file it with | this form. On line 39 o | of that form, copy your current n | nonthly incom- | e from line 14 above. |

| Fill in | this info | ormation to ide | entify your case: | | | | | | |
|------------------|---------------------|-------------------------------------|---|--|---|----------------------|-----------|----------------------|-----------------------------|
| Debtor | 1 | Ann W. Cha | an | | | | | | |
| Debtor (Spous | · 2 se, if filin | ıg) | | | | | | | |
| United | States | Bankruptcy Cou | urt for the: District of New Jerse | ;y | | | | | |
| Case r | | 3:25-bk-101 | 182 | | | □с | heck if | this is an amende | ed filing |
| | Form 1 | | ulation of Your Di | spos | able Inco | me | | | 04/22 |
| | | | need your completed copy of Form 122C-1). | <u>-</u> Chapter | 13 Statement of | Your Current Mor | nthly Inc | come and Calculat | ion of |
| space i | s neede write y | ed, attach a sep our name and o | e as possible. If two married pe parate sheet to this form, Includ case number (if known). deductions from Your Income | | | | | | |
| que info | stions i rmatior | n lines 6-15. To ı may also be a | vice (IRS) issues National and I o find the IRS standards, go or available at the bankruptcy cle | nline usii rk's offic | ng the link speci ce. | fied in the separa | te instru | uctions for this for | m. This |
| expe | enses if | they are higher | nts set out in lines 6-15 regardles than the standards. Do not inclu any amounts that you subtracted | de any o | perating expense | s that you subtracte | ed from | income in lines 5 ar | your actual id 6 of Form |
| If yo | ur expe | nses differ from | month to month, enter the avera | ige expe | nse. | | | | |
| Note | e: Line n | umbers 1-4 are | not used in this form. These nur | nbers ap | ply to information | required by a simil | lar form | used in chapter 7 c | ases. |
| 5. | The nu | ımber of peopl | e used in determining your de | ductions | from income | | | | |
| | the nur | | eople who could be claimed as e litional dependents whom you su our household. | | | | | 3 Living Housing | |
| Nati | ional St | andards | You must use the IRS Nation | al Standa | ards to answer the | e questions in lines | 6-7. | | |
| 6. | | | other items: Using the number of t for food, clothing, and other iter | | ou entered in line | 5 and the IRS Nati | ional Sta | andards, \$ | 1,677.00 |
| 7. | the dol people | lar amount for o who are 65 or o | care allowance: Using the num but-of-pocket health care. The nu olderbecause older people have mount, you may deduct the addit | mber of period and the mber of | people is split into r IRS allowance f | two categoriespe | eople wh | no are under 65 and | 1 |
| Peo | ple who | are under 65 | years of age | | | | | | |
| | 7a. O | ut-of-pocket hea | alth care allowance per person | \$ | 83.00 | | | | |
| | 7b. N | umber of people | e who are under 65 | x | 3 | | | | |
| | 7c. S | ubtotal. Multiply | y line 7a by line 7b. | \$ | 249.00 | Copy here=> | \$ | 249.00 | |

People who are 65 years of age or older

158.00 7d. Out-of-pocket health care allowance per person

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

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| Debtor 1 | | Ann W. Chan | | _ | Case number (if know | vn) 3:2 | 5-bk-10 ² | 182 |
|------------|-------|--|--------------------|-----------------|---|--------------|----------------------|---------------------------------|
| | 7e. | Number of people who are 65 or older X | | 0 | | | | |
| | 7f. | Subtotal. Multiply line 7d by line 7e. \$ | | 0.00 | Copy here=> | \$ | 0.00 | |
| | 7g. | Total. Add line 7c and line 7f | | \$ | 249.00 | Copy to | tal here=> | \$\$ |
| Loc | al St | andards You must use the IRS Local Standards to ans | swer the | questions | in lines 8-15. | | | |
| | | n information from the IRS, the U.S. Trustee Program is into two parts: | has divi | ded the IF | RS Local Standard for | housing | for bank | ruptcy |
| ⊠ ⊦ | lous | sing and utilities - Insurance and operating expenses sing and utilities - Mortgage or rent expenses | | | | | | |
| To a | ınsw | ver the questions in lines 8-9, use the U.S. Trustee Pro | gram ch | art. To fir | nd the chart, go online | using th | e link sp | ecified in the separate |
| inst 8. | Ηοι | ions for this form. This chart may also be available at using and utilities - Insurance and operating expenses dollar amount listed for your county for insurance and op | s: Using t | he numbe | clerk's office. Fr of people you entered | d in line 5, | fill in \$_ | 797.00 |
| 9. | Ho | using and utilities - Mortgage or rent expenses: | | | | | | |
| | 9a. | Using the number of people you entered in line 5, fill in listed for your county for mortgage or rent expenses. | the dolla | r amount | | \$ | 60.00 | |
| | 9b. | Total average monthly payment for all mortgages and o | other deb | ts secure | d by your home. | | | |
| | | To calculate the total average monthly payment, add all contractually due to each secured creditor in the 60 mor bankruptcy. Next divide by 60. | | | or | | | |
| | | Name of the creditor | Avera payme | ge month ent | lly | | | |
| | | Citibank N.A. | \$ | 400 | .00 | | | |
| | | Midland Mortgage Co | \$ | 3,800 | .00 | | | |
| | | 9b. Total average monthly payment | \$ | 4,200 | Copy here=> -\$ | 4 | ,200.00 | Repeat this amount on line 33a. |
| | 9c. | Net mortgage or rent expense. | | | | | _ | |
| | | Subtract line 9b (total average monthly payment) from lin rent expense). If this number is less than \$0, enter \$0. | ne 9a (<i>m</i> o | ortgage or | \$ | 0.00 | Copy here=> | \$0.00 |
| 10. | affe | ou claim that the U.S. Trustee Program's division of tects the calculation of your monthly expenses, fill in a | | | | ncorrect | and | \$0.00_ |

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| Debtor 1 | Ann W. Chan | | Case number (if known) | 3:25-bk-10182 | |
|----------|---|----------------------------|------------------------|---------------------------------------|--------|
| 11. | Local transportation expenses: Check the number of veh | icles for which you claim | n an ownership or ope | rating expense. | |
| | ☐ 0. Go to line 14. | | | | |
| | ☐ 1. Go to line 12. | | | | |
| | ☑ 2 or more. Go to line 12. | | | | |
| 12. | Vehicle operation expense: Using the IRS Local Standard operating expenses, fill in the <i>Operating Costs</i> that apply for | | | | 754.00 |
| 13. | Vehicle ownership or lease expense: Using the IRS Local may not claim the expense if you do not make any loan or lethan two vehicles. | | | | |
| Vel | nicle 1 Describe Vehicle 1: | | | | |
| 13a. | Ownership or leasing costs using IRS Local Standard | | \$ 619. | 00 | |
| 13b. | Average monthly payment for all debts secured by Vehicle 2 Do not include costs for leased vehicles. | 1. | | | |
| | To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 months bankruptcy. Then divide by 60. | | at | | |
| | Name of each creditor for Vehicle 1 | Average monthly payment | | | |
| | NONE- | \$ | | | |
| | Total Average Monthly Payment | \$0.00 | Copy here => -\$ | Repeat this amount on line 33b. | |
| 13c. | Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$ | 0, enter \$0 | \$619. | Copy net Vehicle 1 expense here => \$ | 619.00 |
| Vel | nicle 2 Describe Vehicle 2: | | | <u></u> | |
| 13d. | Ownership or leasing costs using IRS Local Standard | | \$ 619. | 00 | |
| 13e. | Average monthly payment for all debts secured by Vehicle 2 leased vehicles. | 2. Do not include costs f | or | | |
| | Name of each creditor for Vehicle 2 | Average monthly payment | | | |
| | NONE- | \$ | | | |
| | | | Сору | | |
| | Total average monthly payment | \$ | here => -\$ | Repeat this amount on line 33c. | |
| 13f. | Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this number is less than \$ | 0, enter \$0 | \$619. | Copy net Vehicle 2 expense here => \$ | 619.00 |
| 14. | Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of | | | , fill in the \$ | 0.00 |
| 15. | Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in v claim more than the IRS Local Standard for <i>Public Transportation</i> and the IRS Local Standard for <i>Public Tra</i> | vhat you believe is the ap | | | 0.00 |

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Debtor 1 Ann W. Chan Case number (if known) 3:25-bk-10182

| Oth | ln addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories. | for |
|-----|--|-------------|
| 16. | Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes. | \$284.92 |
| 17. | Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. | |
| | Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. | \$ <u> </u> |
| 18. | Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. | \$ |
| 19. | Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. | |
| | Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. | \$ |
| 20. | Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or | \$ 0.00 |
| 21 | Splides to the total monthly amount that you now for childeers, such as helpositing, doverso, burson, and procedure. | \$0.00_ |
| ۷۱. | Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education. | \$ 0.00 |
| 22. | Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25. | \$ 0.00 |
| 23. | Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted. | +\$0.00 |
| 24. | Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23. | \$4,999.92 |
| Add | These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24. | |
| 25. | Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents. | |
| | Health insurance \$ 0.00 | |
| | Disability insurance \$ 0.00 | |
| | Health savings account + \$ | |
| | Total \$ Copy total here=> | \$0.00 |
| | Do you actually spend this total amount? ☐ No. How much do you actually spend? ☐ Yes Substitute: ☐ Yes | |
| 26. | Continuing contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b) | \$0.00_ |
| 27. | Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. | |
| | By law, the court must keep the nature of these expenses confidential. | \$0.00 |

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| ebtor 1 | Ann W. Chan | Case number | (if known) | 3:25-bk-1 | 0182 | |
|-------------|--|--|-------------|---------------------------------|---------------|----------|
| | Additional home energy costs. Your hom 8. | e energy costs are included in your insurance and ope | erating exp | enses on lin | е | |
| | If you believe that you have home energy co then fill in the excess amount of home ener | ests that are more than the home energy costs include gy costs | ed in exper | nses on line 8 | 3, | |
| | You must give your case trustee document claimed is reasonable and necessary. | ation of your actual expenses, and you must show tha | at the addi | tional amour | nt \$ | 0.0 |
| | | ren who are younger than 18. The monthly expens pendent children who are younger than 18 years old | | | | |
| | You must give your case trustee document is reasonable and necessary and not alread | ation of your actual expenses, and you must explain v dy accounted for in lines 6-23. | why the an | nount claime | d | |
| | * Subject to adjustment on 4/01/25, and even | ery 3 years after that for cases begun on or after the | date of ad | justment. | \$ | 0.0 |
| | | he monthly amount by which your actual food and clo allowances in the IRS National Standards. That amou he IRS National Standards. | | | n | |
| | To find a chart showing the maximum addit for this form. This chart may also be availal | onal allowance, go online using the link specified in the link specified in the lankruptcy clerk's office. | he separa | te instruction | s | |
| | You must show that the additional amount | claimed is reasonable and necessary. | | | \$ | 0.0 |
| | Continuing charitable contributions. The instruments to a religious or charitable organizations. | amount that you will continue to contribute in the for nization. 11 U.S.C. § 548(d)(3) and (4). | rm of cash | or financial | | |
| | Do not include any amount more than 15% | of your gross monthly income. | | | \$ | 0.0 |
| | Add all of the additional expense deduct Add lines 25 through 31. | ions. | | | \$ | 0.00 |
| Dedi | uctions for Debt Payment | | | | | |
| а | nd other secured debt, fill in lines 33a th | n property that you own, including home mortgag rough 33e. ent, add all amounts that are contractually due to eac | | | | |
| | reditor in the 60 months after you file for ba | | cii secure | 4 | | |
| | Mortgages on your home | | | | Average | |
| 33a. | Conv line 9h here | | | => | payment \$ | 4,200.00 |
| | Loans on your first two vehicles | | | | * | -, |
| 33b. | • | | | => | \$ | 0.00 |
| 33c. | • • | | | | \$ | 0.00 |
| | | | | | Ψ | 0.00 |
| 33d. Nam | List other secured debts: e of each creditor for other secured debt | Identify property that secures the debt | includ | payment de taxes surance? | | |
| | | | | No | | |
| | -NONE- | | | Yes | \$ | |
| | | | | | Ψ | |
| | | | | No | | |
| | | | _ □ | Yes | \$ | |
| | | | П | No | | |
| | | | _ | Yes + | ¢ | |
| | | | | | \$ | |
| 33e | Total average monthly payment. Add lines | s 33a through 33d\$ | 4,200 | Copy total .00 here= | | 4,200.00 |

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Ann W. Chan Case number (*if known*) 3:25-bk-10182 Debtor 1 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? Go to line 35. X Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Monthly cure Total cure amount amount 2nd Mortgage on 47 Lori Street, Citibank N.A. Monroe, NJ 08831 $173,551.22 \div 60 = $$ 2,892.52 Midland Mortgage Co Mortgage on 47 Lori Street, Monroe, NJ \$ **200,592.00** ÷ 60 = \$ 3.343.20 $\div 60 = +$ \$ Copy total 6,235.72 6,235.72 Total here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 0.00 0.00 36. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total Average monthly administrative expense here=> 37. Add all of the deductions for debt payment. Add lines 33e through 36. 10,435.72 **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS expense allowances 4,999.92 0.00 Copy line 32, All of the additional expense deductions Copy line 37, All of the deductions for debt payment 10,435.72 15,435.64 15,435.64 Total deductions..... Copy total here=>

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Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)

39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13

| 39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 statement of Your Current Monthly Income and Calculation of Commitment Period | Part 2: De | termine You | r Disposable Income Under 11 U.S.C. § 1325 | (b)(2) | | | | |
|---|------------------------------------|---|--|--|----------------------|-----------------------------|--|--|
| children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child, reported in Part I of Form 122C-1, that you remployer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). 42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here => \$ 15,435.64 43. Deduction for special circumstances. If special circumstances and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. Describe the special circumstances Amount of expense Amount of expense Amount of expense 44. Total adjustments. Add lines 40 through 43 | | | | | | | \$\$ | .84 |
| employer withfuld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). 42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here | children disability received | n. The monthly payments for in accordance | y average of any child support payments, foster or a dependent child, reported in Part I of Form 1 be with applicable nonbankruptcy law to the exte | care payments, or 22C-1, that you | \$ | 0.0 | <u>10</u> | |
| 43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case will be open, fill in the information below. For example, if the wages riported increased, fill in when the increase occurred, and fill in the amount of the head of change increase or increased. Form Line Reason for change Pate of change in Increase or Amount of change Line Reason for change Date of change in Increase or Amount of change Line Reason for change Date of change in Increase or Amount of change Line Reason for change Date of change in Increase or Amount of change Line Reason for change Date of change in Increase or Amount of change Line Reason for change Date of change in Increase or Amount of change Line Reason for change Date of change in Increase or Amount of change Date of change in Increase or Amount of change Amount of expenses or Amount of change Amount of change Date of change increase or Amount of change | employe 11 U.S.C | r withheld from C. § 541(b)(7) | m wages as contributions for qualified retiremen plus all required repayments of loans from retir | it plans, as specified in | \$ | | <u>10</u> | |
| and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. Amount of expense | 42. Total of | all deduction | ns allowed under 11 U.S.C. § 707(b)(2)(A). Co | ppy line 38 here=> | \$ | 15,435.6 | <u> 54 </u> | |
| \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 15,435.64 Copy here=> \$ 0.00 44. Total adjustments. Add lines 40 through 43 | and you expense | have no reas s. You must g | onable alternative, describe the special circums give your case trustee a detailed explanation of | tances and their | ; | | | |
| \$ 0.00 \$ 0.00 Total \$ 0.00 Copy here=> \$ 0.00 44. Total adjustments. Add lines 40 through 43 | Describe the | e special circ | cumstances | Amount of expen | se | | | |
| \$ 0.00 Total \$ 0.00 Copy here=> \$ 0.00 44. Total adjustments. Add lines 40 through 43 | | | | \$ 0.0 | 00 | | | |
| \$ 0.00 Total \$ 0.00 Copy here=> \$ 0.00 44. Total adjustments. Add lines 40 through 43 | | | | . • | 00 | | | |
| Total \$ | | | | | 00 | | | |
| 44. Total adjustments. Add lines 40 through 43 | | | | , \$ | | | | |
| 44. Total adjustments. Add lines 40 through 43 | | | Total \$ | | | \$ | 0.00 | |
| 44. Total adjustments. Add lines 40 through 43 | | | | | | | Сору | |
| Part 3: Change in Income or Expenses 46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase. Form Line Reason for change Date of change Increase or Amount of change | 44. Total ad | justments. A | odd lines 40 through 43 | => \\$_ | 15 | | | .64 |
| Part 3: Change in Income or Expenses 46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase. Form Line Reason for change Date of change Increase or Amount of change | | | | | | | | \neg |
| 46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase. Form Line Reason for change Date of change Increase or Amount of change | 45. Calculat | e your mont | hly disposable income under § 1325(b)(2). S | ubtract line 44 from line | e 39. | | \$0.00 | <u>) </u> |
| changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase. Form Line Reason for change Date of change Increase or Amount of change | Part 3: Ch | ange in Inco | me or Expenses | | | | | |
| | changed your cas your peti | or are virtual e will be open ition, check 12 | lly certain to change after the date you filed you n, fill in the information below. For example, if the 22C-1 in the first column, enter line 2 in the seco | r bankruptcy petition al e wages reported incre ond column, explain wl | nd durin ased aft | g the time ter you filed | | |
| | Form | Line | Reason for change | Date of change | | | Amount of change | |

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| Debtor 1 | Ann W. Chan | Case number (if known) | 3:25-bk-10182 |
|----------|---|---|--------------------------------|
| | | | |
| | | | |
| Part 4: | Sign Below | | |
| E | By signing here, under penalty of perjury you declare that th | ne information on this statement and in any att | tachments is true and correct. |
| X | /s/ Ann W. Chan Ann W. Chan Signature of Debtor 1 | | |
| Date | January 28, 2025 MM / DD / YYYY | | |

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Debtor 1 Ann W. Chan Case number (if known) 3:25-bk-10182

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 07/01/2024 to 12/31/2024.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions Source of Income: Employer: Andrw Schmierer Dpm Podiatrist, LLC Constant income of \$2,127.84 per month.*

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Debtor 1 Ann W. Chan Case number (if known) 3:25-bk-10182

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 07/01/2024 to 12/31/2024.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer: Moko Omakase, LLC

Constant income of \$12,766.00 per month.*

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Debtor 1 Ann W. Chan Case number (if known) 3:25-bk-10182

*Paycheck Details:

Andrw Schmierer Dpm Podiatrist, LLC

| Date Salary X26 | Earnings 491.04 | Overtime 0.00 | Taxes 65.75 | Other 0.00 | Net Check 425.29 |
|--------------------|--------------------------|----------------------|--------------------|-------------------|---------------------------|
| Totals: | 491.04 | 0.00 | 65.75 | 0.00 | 425.29 |
| Moko Omakase, LLC | | | | | |
| Date Salary X26 | Earnings 2,946.00 | Overtime 0.00 | Taxes 0.00 | Other 0.00 | Net Check 2,946.00 |
| Totals: | 3,437.04 | 0.00 | 65.75 | 0.00 | 3,371.29 |

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| | | Document | Page 15 of 36 | |
|---------------------|------------------------|------------------------|---------------|--------------------------------------|
| Fill in this inform | ation to identify your | case: | | |
| Debtor 1 | Ann W. Chan | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ban | kruptcy Court for the: | DISTRICT OF NEW JERSEY | | |
| Case number 3: | :25-bk-10182 | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| | | | | _ |
| | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| you | r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. | eu sche | dules alter you me |
|-----|---|----------|--------------------------------|
| Pai | t 1: Summarize Your Assets | | r assets le of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$_ | 591,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$_ | 8,952.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$_ | 599,952.00 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | r liabilities ount you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$_ | 1,119,608.22 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$_ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$_ | 61,966.60 |
| | Your total liabilities | \$ | 1,181,574.82 |
| Pai | t 3: Summarize Your Income and Expenses | | _ |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$_ | 14,608.92 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$_ | 13,320.67 |
| Pai | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo | ur other | schedules. |
| 7. | | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | persona | ıl, family, or household |
| | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this is court with your other schedules. | ox and | submit this form to the |

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Debtor 1 Ann W. Chan Case number (if known) 3:25-bk-10182

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$______\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Tota | al claim |
|--|------|----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$_ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$_ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$_ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$_ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

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| | | | | | Docu | ument | Page 17 | of 36 | | | | |
|---------------------|--|-------------------------------|-------------------------|-----------------------------------|--------------------------|--------------------------------|---|------------------------------------|--------------------------|---------------|-------------|----------------------|
| Fill in | this informa | ation to ider | ntify you | r case and th | nis filing | j: | | | | | | |
| Debto | r 1 | Ann W. C | han | | | | | | | | | |
| | | First Name | | Middle | Name | | Last Name | | | | | |
| Debto (Spouse | r 2 e, if filing) | First Name | | Middle | Name | | Last Name | | | | | |
| l lucita d | l Ctataa Dawl | | 4 6 41 | DICTRICT | OF NEW | V JEDOEV | | | | | | |
| United | i States Bank | kruptcy Cour | t for the: | DISTRICT | OF NEV | VJERSEY | | | | | | |
| Case | number <u>3:</u> | 25-bk-1018 | 82 | | | | _ | | | | _ | ck if this is an |
| | | | | | | | | | | | ame | nded filing |
| | | | - | | | | | | | | | |
| | <u>cial For</u> | | | | | | | | | | | |
| Sch | nedule | A/B: | Prop | erty | | | | | | | 12/1 | 5 |
| think it informa | fits best. Be tion. If more s every question | as complete space is need on. | and accu led, attach | rate as possib a a separate sh | le. If two neet to th | married peo is form. On the | f an asset fits in ple are filing tog he top of any ad wn or Have an I | ether, both are ditional pages, | equally respo | nsible for su | applying co | rrect |
| 1 Do | vou own or ha | ave any legal | or equital | ale interest in | any rosic | lence huildin | ıg, land, or simil | ar property? | | | | |
| | - | | or equitar | ne interest in | any resid | ierice, buildin | ig, iaiiu, oi siiiii | al property: | | | | |
| _ | o. Go to Part 2 es. Where is | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| 1.1 | | | | | What | is the proper | ty? Check all that a | apply | | | | 5. |
| | Treet address, if a | | er description | 1 | | Single-family | | | the amount of | | d claims on | Schedule D: |
| J | | | , acco.,p | | | • | ulti-unit building m or cooperative | | Creditors Wh | no Have Clain | ns Secured | by Property. |
| | | | | | | | d or mobile home |) | 0 | | | .1 |
| | lonroe Tov | wnship N | J 08 | 831 | | Land | | | Current valuentire prope | | portion y | value of the ou own? |
| С | ity | Sta | ate | ZIP Code | | Investment p | roperty | | \$1,182 | 2,000.00 | \$ | 5591,000.00 |
| | | | | | | Timeshare Other | | | | e nature of y | | • |
| | | | | | Who | has an interes | st in the propert | y? Check one | à life estate) | , if known. | ancy by the | entireties, or |
| _ | | | | | | Debtor 1 only | y | | Fee Simp | le | | |
| _ | /liddlesex | | | | | Debtor 2 only | У | | | | | |
| С | county | | | | | | Debtor 2 only | | | f this is com | munity pro | perty |
| | | | | | ⊠ Other | | of the debtors an you wish to add | | ⊔ (see instr | , | | |
| | | | | | | erty identifica | | | , | | | |
| | | | | | Join | t with non | -debtor spou | ıse, Steven | Wong | | | |
| | | | | | | | | | | | | |
| | | | | _ | | | | | | | | |
| | | | | | | | from Part 1, i | | | => | \$59 | 1,000.00 |
| | | | | | | | | | | | | |
| Part 2: | Describe Yo | our Vehicles | | | | | | | | | | |
| D | 1 | | | | | | | | -1 | | . 1. 1 . 1 | |
| | | | | | | | whether they Executory Cont | | | | enicies you | ı own mat |
| 3. C a | rs. vans. tru | icks, tractor | s. sport | utility vehicl | es. mot | orcvcles | | | | | | |
| | | , | ., spoit | | , | , | | | | | | |
| ⊠ N □ Y | | | | | | | | | | | | |

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| De | ebtor 1 | Ann W. Chai | n | Case number | (if known) | 3:25-bk-10182 |
|-----|--------------------------|---|--|--|-------------|---|
| | | | otor homes, ATVs and other recreational vehicl motors, personal watercraft, fishing vessels, snow | | ories | |
| | ⊠ No ⊒ Yes | | | | | |
| 5 | | | the portion you own for all of your entries fron ed for Part 2. Write that number here | | | \$0.00 |
| Pa | rt 3: Des | scribe Your Perso | nal and Household Items | | | |
| Do | • | · | egal or equitable interest in any of the following | g items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6. | Example ☐ No | old goods and es: Major applian Describe | furnishings nces, furniture, linens, china, kitchenware | | | |
| | | | Household Furnishings Joint with non-debtor spouse, Steven W | ong | | \$2,600.00 |
| 7. | □ No | es: Televisions a | nd radios; audio, video, stereo, and digital equipmonths phones, cameras, media players, games | ent; computers, printers, scanners | s; music c | ollections; electronic devices |
| | <u></u> | Decembe | Electronics Joint with non-debtor spouse, Steven W | ong | | \$2,500.00 |
| В. | <i>Example</i> ☑ No | | figurines; paintings, prints, or other artwork; books ons, memorabilia, collectibles | s, pictures, or other art objects; sta | amp, coin, | or baseball card collections; |
| 9. | Example | es: Sports, photo musical instru Describe | graphic, exercise, and other hobby equipment; bic | ycles, pool tables, golf clubs, skis | s; canoes a | and kayaks; carpentry tools; |
| 10. | Firearı Examp ⊠ No | ms | s, shotguns, ammunition, and related equipment | | | |
| | ☐ No É | | othes, furs, leather coats, designer wear, shoes, a | ccessories | - | |
| | | | Wearing Apparel | |] | \$520.00 |
| | ☐ No | | welry, costume jewelry, engagement rings, weddin | g rings, heirloom jewelry, watche | s, gems, ç | gold, silver |
| | | | Jewelry | |] | \$2,200.00 |
| 13. | | arm animals les: Dogs, cats, | birds, horses | | | |

☐ Yes. Describe.....

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| Debtor | 1 Ann W. C | han | | | | Case number (if known) | 3:25-bk-10182 |
|-----------------------|--|--|--|---|--------------------------|---------------------------------------|--|
| 14. _A r | ny other persona | al and hous | ehold items you di | id not already list, ir | ncluding any health | aids you did not list | |
| ⊠ N □ Y | lo ′es. Give specif | fic informatio | n | | | | |
| | · | | | | | | |
| 15. A | dd the dollar va | lue of all of | your entries from | Part 3, including any | y entries for pages | you have attached | 4 |
| fo | or Part 3. Write the | hat number | here | | | | <u>\$7,820.00</u> |
| | 1 | | | | | | |
| | Describe Your Fi | | | in any of the followir | ng? | | Current value of the |
| 50 you | a own or nave a | ny logar or c | quitable interest i | in unity of the followin | 9. | | portion you own? Do not deduct secured claims or exemptions. |
| | <i>amples:</i> Money y lo | - | - | nome, in a safe depos | | when you file your petiti | on |
| | | | | | | Cash on Hand | \$50.00 |
| <i>E</i> x | institutio | g, savings, o | | counts; certificates of ts with the same instit Institution na | tution, list each. | edit unions, brokerage l | nouses, and other similar |
| | | 17.1. | Checking | Chase Ban | nk Checking Acco | ount (3380) | \$1,082.00 |
| — 19. N o | 'es | ed stock and | Institution or issue | | orporated business | es, including an intere | st in an LLC, partnership, |
| \boxtimes N | lo T | 6 - i.e.f 4i | | | | | |
| ЦY | res. Give specii | | n about them me of entity: | | | % of ownership: | |
| Ne No ⊠ N | egotiable instrume on-negotiable inst | ents include parts include parts are information | personal checks, ca those you cannot tr | egotiable and non-ne ashiers' checks, prom ransfer to someone b | nissory notes, and mo | oney orders. | |
| <i>Ex</i> ⊠ N | lo ['] | s in IRA, ERI | SA, Keogh, 401(k), | 403(b), thrift savings | accounts, or other p | ension or profit-sharing | plans |
| ЦΥ | es. List each acc | | tely. of account: | Institution na | ame: | | |
| Yo | amples: Agreeme | nused deposi | ts you have made s | so that you may conting t, public utilities (elect | | om a company communications compai | nies, or others |
| _ | es | - | | Institution na | ame or individual: | | |
| 23. A r 🛛 N | | act for a peri | odic payment of mo | oney to you, either for | · life or for a number o | of years) | |
| | 'es | Issuer nam | e and description. | | | | |
| | J.S.C. §§ 530(b)(| | | qualified ABLE prog | gram, or under a qua | alified state tuition pro | ogram. |
| | 'es | Institution i | name and description | on. Separately file the | e records of any inter | ests.11 U.S.C. § 521(c) | : |

Official Form 106A/B Schedule A/B: Property page 3

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| De | ebtor 1 | Ann W. Chan | Document | raye 20 01 30 | number (if known) 3: | 25_hk_10182 |
|-----|--------------------------|--|---|---------------------------------|--------------------------|---|
| | , | | | | | |
| 25. | Trusts, ⊠ No | equitable or future interests in proper | ty (other than anythir | ig listed in line 1), and rig | nts or powers exerc | isable for your benefit |
| | ☐ Yes. | Give specific information about them | | | | |
| 26. | | s, copyrights, trademarks, trade secrets es: Internet domain names, websites, pro- | * | | | |
| | | Give specific information about them | | | | |
| 27. | _Exampl | es, franchises, and other general intanges: Building permits, exclusive licenses, c | | holdings, liquor licenses, p | rofessional licenses | |
| | ⊠ No □ Yes. | Give specific information about them | | | | |
| Me | oney or p | roperty owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax ref ⊠ No | unds owed to you | | | | |
| | Yes. G | ive specific information about them, inclu | ding whether you alrea | ady filed the returns and the | tax years | |
| | | | | | | |
| 29. | Family Example | support es: Past due or lump sum alimony, spous | al support, child suppo | rt maintenance divorce se | ttlement property set | tlement |
| | ⊠ No É | ive specific information | ar support, orma suppo | rt, maintenance, arrende de | alomoni, property co. | |
| | ☐ 165. C | ive specific information | | | | |
| 30. | | mounts someone owes you es: Unpaid wages, disability insurance pa benefits; unpaid loans you made to so | | efits, sick pay, vacation pay, | workers' compensa | ation, Social Security |
| | ☐ Yes. | Give specific information | | | | |
| 31. | | s in insurance policies es: Health, disability, or life insurance; hea | alth savings account (F | HSA); credit, homeowner's, | or renter's insurance | |
| | ☐ Yes. N | ame the insurance company of each poli Company name: | cy and list its value. | Beneficiary: | | Surrender or refund value: |
| 32. | If you an someon ☑ No | erest in property that is due you from set the beneficiary of a living trust, expect pe has died. Give specific information | | | ntly entitled to receive | property because |
| 33. | <i>Exampl</i> ⊠ No | against third parties, whether or not your ses: Accidents, employment disputes, insu | | | ayment | |
| 34. | Other o | ontingent and unliquidated claims of e | every nature, includin | g counterclaims of the de | btor and rights to s | et off claims |
| | ⊠ No | Describe each claim | • | _ | 5 | |
| 35. | Any fin | ancial assets you did not already list | | | | |
| | ⊠ No □ Yes. | Give specific information | | | | |
| 36 | | e dollar value of all of your entries fror t 4. Write that number here | | | ave attached | \$1,132.00 |
| Pa | rt 5: Des | ribe Any Business-Related Property You O | wn or Have an Interest I | n. List any real estate in Part | ı . | |
| | | wn or have any legal or equitable interest in | any business-related p | roperty? | | |
| _ | No. Go t | o Part 6. | | | | |

Official Form 106A/B Schedule A/B: Property

page 4

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Debtor 1 Ann W. Chan Case number (if known) 3:25-bk-10182 Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ⊠ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$591,000.00 56. Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$7,820.00 58. Part 4: Total financial assets, line 36 \$1,132.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00

\$0.00

Copy personal property total

\$8,952.00

Official Form 106A/B Schedule A/B: Property page 5

61. Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$8,952.00

\$599,952.00

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| Fill in this inform | Fill in this information to identify your case: | | | | | | | |
|---|---|------------------------|-----------|--|--|--|--|--|
| Debtor 1 | Ann W. Chan | | | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | | |
| United States Bankruptcy Court for the: | | DISTRICT OF NEW JERSEY | | | | | | |
| Case number 3 (if known) | ☐ Check if this is an amended filing | | | | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | Irt 1: Identify the Property You Claim as E | xempt | | | | |
|----|--|--------------------------------------|-------------|---|------------------------------------|--|
| 1. | Which set of exemptions are you claiming | ? Check one only, eve | n if yo | ur spouse is filing with you. | | |
| | ☐ You are claiming state and federal nonban | kruptcy exemptions. | 11 L | J.S.C. § 522(b)(3) | | |
| | ∑ You are claiming federal exemptions. 1 ⁻¹ | 1 U.S.C. § 522(b)(2) | | | | |
| 2. | For any property you list on Schedule A/B | that you claim as exe | empt, | fill in the information below. | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption | |
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | |
| | 47 Lori Street, Monroe Township, NJ | \$591,000.00 | \boxtimes | \$27,900.00 | 11 U.S.C. § 522(d)(1) | |
| | Middlesex County Joint with non-debtor spouse, Steven Wong Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | 47 Lori Street, Monroe Township, NJ | \$591,000.00 | \boxtimes | \$18.00 | 11 U.S.C. § 522(d)(5) | |
| | Middlesex County Joint with non-debtor spouse, Steven Wong Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Household Furnishings | \$2,600.00 | \boxtimes | \$2,600.00 | 11 U.S.C. § 522(d)(3) | |
| | Joint with non-debtor spouse, Steven Wong Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Electronics | \$2,500.00 | \boxtimes | \$2,500.00 | 11 U.S.C. § 522(d)(3) | |
| | Joint with non-debtor spouse, Steven Wong Line from Schedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Wearing Apparel | \$520.00 | \boxtimes | \$520.00 | 11 U.S.C. § 522(d)(3) | |
| | Line from Schedule A/B: 11.1 | | | 100% of fair market value, up to any applicable statutory limit | | |

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| De | ebtor 1 Ann W. Chan | | | Case number (if known) | 3:25-bk-10182 | |
|----|--|--------------------------------------|---|---|------------------------------------|--|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | | ount of the exemption you claim | Specific laws that allow exemption | |
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | |
| | Jewelry | \$2,200.00 | \boxtimes | \$1,875.00 | 11 U.S.C. § 522(d)(4) | |
| | Line from Schedule A/B: 12.1 | | 100% of fair market value, up to any applicable statutory limit | | | |
| | Jewelry | \$2,200.00 | | \$325.00 | 11 U.S.C. § 522(d)(5) | |
| | Line from <i>Schedule A/B</i> : 12.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Cash on Hand | \$50.00 | \boxtimes | \$50.00 | 11 U.S.C. § 522(d)(5) | |
| | Line from Schedule A/B: 16.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Chase Bank Checking Account | \$1,082.00 | | \$1,082.00 | 11 U.S.C. § 522(d)(5) | |
| | (3380) Line from <i>Schedule A/B</i> : 17.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/25 and every in the property covered in the property cov | 3 years after that for ca | ses fi | • | , | |

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| Fill in this infor | | | | |
|---------------------|--------------------------|------------------------|-----------|------------------------------------|
| Debtor 1 | Ann W. Chan | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF NEW JERSEY | | |
| Case number _ | 3:25-bk-10182 | | | |
| (if known) | | | | Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| P | erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|-----|---|--|
| 2.1 | American Honda Finance PO Box 168088 Attn: Bankruptcy Irving, TX 75016-8088 | Installment account opened 07/01/2022 on 2022 Honda CR-V Credit Limit: \$19,440.00, Remaining Balance: \$10,800.00 |
| 2.2 | Toyota Financial Services PO Box 259001 Attn: Bankruptcy Plano, TX 75025-9001 | Installment account opened 06/01/2022 on 2022 Toyota Camry Credit Limit: \$15,480.00, Remaining Balance: ?2,580.00 |

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| | | Documer | it Page 25 01 36 | |
|-----------------------------------|--|---|---|---|
| Fill in th | is information to identify your o | case: | | |
| Dobtor 1 | Ann W. Chan | | | |
| Debtor 1 | First Name | Middle Name | Last Name | - |
| Debtor 2 | | | | |
| (Spouse if, | filing) First Name | Middle Name | Last Name | _ |
| المناهم ما ٥ | tatas Baulanintai Carint familia | DICTRICT OF NEW JED | orv. | |
| United S | tates Bankruptcy Court for the: | DISTRICT OF NEW JER | SET | - |
| Case nu | mber 3:25-bk-10182 | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| Ott: ⁻: | -l F 10011 | | | |
| | al Form 106H | | | |
| Sche | dule H: Your Code | ebtors | | 12/15 |
| | | | | |
| eople a ill it out, our nan | re filing together, both are equa and number the entries in the l ne and case number (if known). | ally responsible for suppl boxes on the left. Attach Answer every question. | ying correct information. If more spath the Additional Page to this page. On | d accurate as possible. If two married ace is needed, copy the Additional Page, the top of any Additional Pages, write |
| 1. D | o you have any codebtors? (If y | ou are filing a joint case, d | o not list either spouse as a codebtor. | |
| □ N ⊠ Y | | | | |
| | | | perty state or territory? (Community rto Rico, Texas, Washington, and Wisc | |
| | | , | , , , , | , |
| _ | o. Go to line 3. | una ar lagal aguivalent liva | with you at the time? | |
| Ц 1 | es. Did your spouse, former spou | se, or legal equivalent live | with you at the time? | |
| in liı Forr | ne 2 again as a codebtor only if | that person is a guarant | or or cosigner. Make sure you have le G (Official Form 106G). Use Sche | e is filing with you. List the person shown listed the creditor on Schedule D (Official dule D, Schedule E/F, or Schedule G to fill the creditor to whom you owe the debt |
| | Name, Number, Street, City, State and ZIF | ² Code | Check all s | chedules that apply: |
| 3.1 | Steven Wong 47 Lori Street Monroe Township, NJ 088 | 31 | ⊠ Schedu □ Schedu | ule D, line ule E/F, line4.4 ule G Honda Finance |
| | | | 5 .0.1.1 | |
| 3.2 | Steven Wong 47 Lori Street | | ⊠ Schedu | ule D, line <u>2.1</u> |
| | Monroe Township, NJ 0883 | 21 | | ıle E/F, line ıle G |
| | Wolfide Township, No 000 | 31 | Citibank I | |
| | | | - Citibanik i | ···· |
| 3.3 | Steven Wong | | ⊠ Schedu | ıle D, line <u>2.2</u> |
| 0.0 | 47 Lori Street | | | lle E/F, line |
| | Monroe Township, NJ 0883 | 31 | ☐ Schedu | |
| | , , | | | Mortgage Co |
| | | | | |
| 3.4 | Steven Wong | | ☐ Schedu | ıle D, line |
| | 47 Lori Street | | ☐ Schedu | ıle E/F, line |
| | Monroe Township, NJ 0883 | 31 | ⊠ Schedu | ıle G <u>2.1</u> |
| | | | ∆marican | Honda Finance |

| Fill ir | n this information to identify your c | ase: | | | | | | | | | |
|-----------------|---|-------------------------------|----------------------------|----------------------------|----------------|-----------------|----------------------|----------------------------------|------------------------|--------------------------------|-------------------|
| Debt | tor 1 Ann W. Cha | n | | | | | | | | | |
| Debt (Spou | tor 2 | | | | | _ | | | | | |
| Unite | ed States Bankruptcy Court for the | : DISTRICT OF NEW J | ERSEY | | | _ | | | | | |
| Case (If kno | 3:25-bk-10182 own) | | - | | | | ☐ An | | d filing ent show | ing postpetitior | |
| Of | ficial Form 106I | | | | | | | 1 / DD/ Y | | Tollowing date | • |
| | hedule I: Your Inc | ome | | | | | IVIIV | ו וטטו ו | | | 12/15 |
| supp spou | s complete and accurate as pos- lying correct information. If you se. If you are separated and you h a separate sheet to this form. Describe Employment | are married and not filing wi | ng jointly, ith you, do | and your spont include | ouse infori | is liv matio | ing with yon about y | ou, incl our spo | ude info ouse. If r | ormation abou more space is | t your needed, |
| 1. | Fill in your employment information. | | Debtor | 1 | | | | Debtor 2 | or non- | -filing spouse | |
| | If you have more than one job, attach a separate page with information about additional | Employment status | ⊠ Empl | | | | | ⊠ Emplo | oyed | <u> </u> | |
| | employers. Include part-time, seasonal, or self-employed work. | Occupation | Medica | l Administr | ation | ıs | | Chef - 1 | 099 | | |
| | Occupation may include student or homemaker, if it applies. | Employer's name | | Schmierer rist, LLC | Dpm | | | Moko O | makas | e, LLC | |
| | or nomentation, in trappiles. | Employer's address | | tre Drive, S e Township | | | | 38 2nd Ave New York, NY 10003 | | | |
| | | How long employed the | | 2 Years | | | | | Year | | |
| Part | 2: Give Details About Mo | nthly Income | | | | | | | | | |
| | nate monthly income as of the da s you are separated. | ate you file this form. If yo | ou have no | thing to report | for ar | ny lin | e, write \$0 | in the sp | ace. Incl | lude your non-f | iling spous |
| | or your non-filing spouse have me space, attach a separate sheet to | | ombine the | information fo | or all e | emplo | oyers for th | at perso | n on the | lines below. If | you need |
| | | | | | | | For Debto | or 1 | | ebtor 2 or iling spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | | 2. | \$ | 2,1 | 27.84 | \$ | 12,766.00 | |
| 3. | Estimate and list monthly over | ime pay. | | | 3. | +\$ | | 0.00 | +\$ | 0.00 | |
| 4. | Calculate gross Income. Add lin | ne 2 + line 3. | | | 4. | \$ | 2,127 | .84_ | \$_ | 12,766.00 | |

Official Form 106I Schedule I: Your Income page 1

| Debt | or 1 | Ann W. Chan | | Case r | number (if known) | 3:25-l | ok-101 | 182 | |
|------|------------------------|--|------------|-------------|-------------------|-------------|----------------|-----------------|----------|
| | | | | For | Debtor 1 | | Debtor | 2 or pouse | |
| | Cop | by line 4 here | 4. | \$ | 2,127.84 | \$ | | 766.00 | |
| 5. | l iet | all payroll deductions: | | | | | | | |
| J. | | | Eo | ¢. | 284.92 | ¢. | | 0.00 | |
| | 5a. 5b. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans | 5a. 5b. | \$ \$ | 0.00 | \$ | | 0.00 | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | | 0.00 | |
| | 5d. | Required repayments of retirement fund loans | 5d. | <u>\$</u> — | 0.00 | \$ | | 0.00 | |
| | 5e. | Insurance | 5e. | \$ | 0.00 | \$ | | 0.00 | |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | | 0.00 | |
| | 5g. | Union dues | 5g. | \$ | 0.00 | \$ | | 0.00 | |
| | 5h. | Other deductions. Specify: | _ 5h.+ | \$ | 0.00 | + \$ | | 0.00 | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 284.92 | \$ | | 0.00 | |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 1,842.92 | \$ | 12, | 766.00 | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0.00 | \$ | | 0.00 | |
| | 8b. | Interest and dividends | 8b. | \$ | 0.00 | \$ | | 0.00 | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | | 0.00 | |
| | 8d. | Unemployment compensation | 8d. | \$ | 0.00 | \$ | | 0.00 | |
| | 8e. 8f. | Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8e. 8f. | \$ \$ | 0.00 | \$ \$ | | 0.00 | |
| | 8g. | Pension or retirement income | _ 8g. | \$ | 0.00 | \$ <u> </u> | | 0.00 | |
| | 8h. | Other monthly income. Specify: | _ 8h.+ | · — | 0.00 | · — | | 0.00 | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | | 0.00 | |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | 1 | + \$_ | 12,70 | 66.00 | = \$ _14 | 4,608.92 |
| 11. | Inclu other Do i | te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your fire friends or relatives. Interpretation of the contribution of the co | depen | | • | | chedule 11. | | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The resulter that amount on the Summary of Schedules and Statistical Summary of Certain lies | | | • | | 12. | \$1 | 4,608.92 |
| 12 | Do. | you expect an increase or decrease within the year after you file this form? | , | | | | , | Combine monthly | |
| 13. | | No. Yes. Explain: | • | | | | | | |

| Fi <u>ll</u> in | this information to identify your case: | | | | |
|-----------------|--|---|-------------------------|------------------------------------|-------------------------------|
| Debtor | | | Ch | e if their in- | |
| Deptoi | Ann W. Chan | | | k if this is: An amended filing | |
| Debtor | | | | A supplement shov | ving postpetition chapter 13 |
| (Spous | se, if filing) | | • | expenses as of the | following date: |
| United | States Bankruptcy Court for the: DISTRICT OF NEW JERSEY | | Ī | MM / DD / YYYY | |
| Case r | number 3:25-bk-10182 | | | | |
| (If know | 0.20 0.1 10 102 | | | | |
| | inial Farma 400 l | | | | |
| | icial Form 106J | | | | |
| | nedule J: Your Expenses s complete and accurate as possible. If two married people ar | e filing together, bot | h are equa | Illy responsible fo | 12/15 |
| inforr | nation. If more space is needed, attach another sheet to this fo own). Answer every question. | | | | |
| Part 1 | : Describe Your Household | | | | |
| _ | s this a joint case? | | | | |
| | ☑ No. Go to line 2.☑ Yes. Does Debtor 2 live in a separate household? | | | | |
| L | □ No | . f O | -1-1 - f D - 1-4 | - · · · 0 | |
| | Yes. Debtor 2 must file Official Form 106J-2, Expenses | s tor Separate Housen | iola of Debt | or 2. | |
| 2. | Do you have dependents? No | | | | |
| | Do not list Debtor 1 and Yes. Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor 2 | | Dependent's age | Does dependent live with you? |
| | Do not state the | Son. | | 24 | □ No |
| C | dependents names. | Son | | 24 | ⊠ Yes □ No |
| | | | | | Yes |
| | | | | | □ No □ Yes |
| | | - | | | □ res □ No |
| | — | | | | Yes |
| e | Do your expenses include ⊠ No expenses of people other than □ Yes yourself and your dependents? | | | | |
| Part 2 | Estimate Your Ongoing Monthly Expenses | | | | |
| Estim | nate your expenses as of your bankruptcy filing date unless ynses as of a date after the bankruptcy is filed. If this is a supposable date. | | | | |
| Inclus | de expenses paid for with non-cash government assistance it | f vou know the | | | |
| | of such assistance and have included it on <i>Schedule I: Your</i> | | | | |
| (Offic | ial Form 106l.) | | | Your exp | enses |
| | The control of the co | | | | |
| | The rental or home ownership expenses for your residence. I be payments and any rent for the ground or lot. | nclude first mortgage | 4. \$ | | 3,800.00 |
| ŀ | f not included in line 4: | | | | |
| 4 | 4a. Real estate taxes | | 4a. \$ | | 0.00 |
| 4 | 4b. Property, homeowner's, or renter's insurance | | 4b. \$ | | 0.00 |
| | 4c. Home maintenance, repair, and upkeep expenses | | 4c. \$ | | |
| | 4d. Homeowner's association or condominium dues | | 4d. \$ | | 0.00 |
| 5. | Additional mortgage payments for your residence, such as ho | ine equity loans | 5. \$ | | 400.00 |
| 6. l | Utilities: | | | | |
| | 6a. Electricity, heat, natural gas | | 6a. \$ | | 470.00 |
| | Water, sewer, garbage collectionTelephone, cell phone, Internet, satellite, and cable services | e | 6b. \$ 6c. \$ | | 100.00 425.00 |
| | oc. Telephone, cell phone, internet, satellite, and cable service: | J | 6d ¢ | | 0.00 |

| Debtor 1 Ann V | V. Chan | Case num | ber (if known) | 3:25-bk-10182 |
|---|--|-----------------|----------------|-------------------------------|
| 7. Food and ho | ousekeeping supplies | 7. | \$ | 925.00 |
| 3. Childcare ar | nd children's education costs | 8. | | 0.00 |
| O. Clothing, lau | ındry, and dry cleaning | | \$ | 250.00 |
| | re products and services | | \$ | 250.00 |
| | dental expenses | 11. | · | 250.00 |
| | on. Include gas, maintenance, bus or train fare. | 11. | Ψ | 200.00 |
| | e car payments. | 12. | \$ | 950.00 |
| | nt, clubs, recreation, newspapers, magazines, and books | | | 0.00 |
| | ontributions and religious donations | | \$ | |
| 15. Insurance. | | | <u> </u> | |
| | e insurance deducted from your pay or included in lines 4 or 20. | | | |
| 15a. Life ins | | 15a. | \$ | 0.00 |
| 15b. Health | insurance | | \$ | |
| 15c. Vehicle | e insurance | 15c. | \$ | 230.67 |
| | nsurance. Specify: | 15d. | • | 0.00 |
| | ot include taxes deducted from your pay or included in lines 4 or 20. | 130. | Ψ | 0.00 |
| | timated Federal Income Tax | 16. | \$ | 3,000.00 |
| | timated State of NJ Income Tax | | \$ | 500.00 |
| | or lease payments: | | Φ | 300.00 |
| | yments for Vehicle 1 | 17a. | ¢ | 540.00 |
| | yments for Vehicle 2 | | · | 420.00 |
| | | 17b. | <u> </u> | 0.00 |
| 17c. Other. | | | · : | |
| 17d. Other. | | 17d. | \$ | 0.00 |
| | nts of alimony, maintenance, and support that you did not report | | ¢. | 0.00 |
| | om your pay on line 5, Schedule I, Your Income (Official Form 100 | 6I). 18. | · | 0.00 |
| Other paymentsSpecify: | ents you make to support others who do not live with you. | 19. | \$ | 0.00 |
| | operty expenses not included in lines 4 or 5 of this form or on S | | | |
| - | ges on other property | 20a. | | 0.00 |
| 20b. Real e | | 20b. | | 0.00 |
| | ty, homeowner's, or renter's insurance | 20c. | ¢ | 0.00 |
| | | | · | 0.00 |
| | nance, repair, and upkeep expenses | 20d. | : | |
| | owner's association or condominium dues | 20e. | | 0.00 |
| Other: Speci | ıy | 21. | +\$ | 0.00 |
| 2. Calculate yo | ur monthly expenses | | | |
| 22a. Add line | s 4 through 21. | | \$ | 13,320.67 |
| 22b. Copy lin | e 22 (monthly expenses for Debtor 2), if any, from Official Form 106J | -2 | \$ | |
| 22c Add line | 22a and 22b. The result is your monthly expenses. | | \$ | 13,320.67 |
| ZZC. Add IIIC | ZZa and ZZb. The result is your monthly expenses. | | Ψ | 13,320.67 |
| 3. Calculate yo | ur monthly net income. | | | |
| 23a. Copy li | ne 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 14,608.92 |
| 23b. Copy y | our monthly expenses from line 22c above. | 23b. | | 13,320.67 |
| | | | | , |
| 23c. Subtra | ct your monthly expenses from your monthly income. | | | |
| | sult is your monthly net income. | 23c. | \$ | 1,288.25 |
| For example, d | ect an increase or decrease in your expenses within the year afte o you expect to finish paying for your car loan within the year or do you expect the terms of your mortgage? | | | ease or decrease because of a |
| ☐ Yes. | Explain here: | | | |

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| Fill in this infor | mation to identify your | case: | | | |
|---------------------|--|------------------------------|--------------------------------|---|-------|
| Debtor 1 | Ann W. Chan | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | First Name | Middle Name | Last Name | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF NEW JERSE | Y | | |
| Case number | 3:25-bk-10182 | | | | |
| (if known) | <u> </u> | | | ☐ Check if this is an | |
| | | | | amended filing | |
| | | | | | |
| Official Ear | m 106Doo | | | | |
| Official For | | | . 1. 4 1 6 . 1 1 | • | |
| Declara | tion About a | ın Individual D | ebtor's Schedi | ules | 12/15 |
| | | | | | |
| If two married p | eople are filing together | , both are equally responsib | le for supplying correct info | mation. | |
| obtaining mone | | n connection with a bankrupt | | a false statement, concealing property to \$250,000, or imprisonment for up t | |
| Sig | n Below | | | | |
| Did you pa | ay or agree to pay some | one who is NOT an attorney | to help you fill out bankrupte | cy forms? | |
| ⊠ No | | | | | |
| ☐ Yes. | Name of person | | | Attach Bankruptcy Petition Preparer's No | tice. |
| _ | • | | | Declaration, and Signature (Official Form | |
| | alty of perjury, I declare re true and correct. | that I have read the summar | y and schedules filed with th | is declaration and | |
| X /s/ Anı | n W. Chan | | X | | |
| | /. Chan | | Signature of Debtor 2 | | |
| Signatu | ile oi Debioi I | | | | |

Date

Date __**January 28, 2025**

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| Fil | I in this informa | ation to identify you | r case: | | | | | | | |
|--|--------------------------------------|---|---|------------------------------------|------------------------------------|------------------------------------|--|--|--|--|
| De | ebtor 1 | Ann W. Chan First Name | Middle Name | Lost Namo | | | | | | |
| De | ebtor 2 | First Name | Middle Name | Last Name | | | | | | |
| | ouse if, filing) | First Name | Middle Name | Last Name | | | | | | |
| Un | nited States Bank | cruptcy Court for the: | DISTRICT OF NEW JERS | SEY | | | | | | |
| Ca | se number 3: | 25-bk-10182 | | | | | | | | |
| _ | (nown) | | | | | Check if this is an amended filing | | | | |
| | | | | | | amended ming | | | | |
| O: | fficial Fori | m 107 | | | | | | | | |
| | | | Affairs for Individ | duals Filing for B | ankruptcy | 04/2 | | | | |
| Be info | as complete an ormation. If me | d accurate as possi | ble. If two married people a l, attach a separate sheet to | are filing together, both are | equally responsible for s | supplying correct | | | | |
| Pa | rt 1: Give De | tails About Your Ma | arital Status and Where You | Lived Before | | | | | | |
| 1. | What is your | current marital statu | ıs? | | | | | | | |
| | Married Not marrie | ed | | | | | | | | |
| 2. During the last 3 years, have you lived anywhere other than where you live now? | | | | | | | | | | |
| | No | ☑ No | | | | | | | | |
| | Yes. List | t all of the places you lived in the last 3 years. Do not include where you live now. | | | | | | | | |
| | Debtor 1: | | Dates Debtor 1 lived there | Debtor 2 Prior Ad | ldress: | Dates Debtor 2 lived there | | | | |
| 3 . stat | | | ver live with a spouse or leq lifornia, Idaho, Louisiana, Ne | | | | | | | |
| | No Yes. Make | e sure you fill out <i>Scl</i> | nedule H: Your Codebtors (O | fficial Form 106H). | | | | | | |
| Pa | rt 2 Explain | the Sources of You | r Income | | | | | | | |
| 4. | Fill in the total If you are filing | amount of income yo | nployment or from operatir u received from all jobs and a have income that you receiv | all businesses, including part | -time activities. | alendar years? | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | | |
| | | | Sources of income | Gross income | Sources of income | Gross income | | | | |
| | | | Check all that apply. | (before deductions and exclusions) | Check all that apply. | (before deductions and exclusions) | | | | |
| • | | | Wages, commissions, bonuses, tips | \$480.00 | ☐ Wages, commissions bonuses, tips | , | | | | |
| | | | Operating a business | | Operating a business | · | | | | |
| | r last calendar ; anuary 1 to Dec | year: ember 31, 2024) | | \$25,454.00 | ☐ Wages, commissions bonuses, tips | , | | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | | | |

Official Form 107

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Page 32 of 36 Debtor 1 Ann W. Chan Case number (if known) 3:25-bk-10182 **Debtor 1** Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions and Check all that apply. Check all that apply. (before deductions exclusions) and exclusions) For the calendar year before that: ⋈ Wages, commissions, ☐ Wages, commissions, \$21,704.00 (January 1 to December 31, 2023) bonuses, tips bonuses, tips Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. Describe below. each source (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more? \square No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ⊠ _{No.} List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment Total amount** Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

Total amount paid

Amount you

still owe

Dates of payment

Yes. List all payments to an insider.

Insider's Name and Address

Reason for this payment

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Page 33 of 36 Debtor 1 Ann W. Chan Case number (if known) 3:25-bk-10182 Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. \boxtimes Yes. List all payments to an insider Insider's Name and Address Total amount Amount you Reason for this payment Dates of payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. П Status of the case Case title Nature of the case Court or agency Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No Go to line 11 Yes. Fill in the information below. **Creditor Name and Address** Value of the Describe the Property Date property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? П Yes Fill in the details **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? \boxtimes Nο Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave per person the gifts Person to Whom You Gave the Gift and Address:

No

more than \$600

Charity's Name

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

Describe what you contributed

Value

Dates you

contributed

Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total

Address (Number, Street, City, State and ZIP Code)

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Debtor 1 Ann W. Chan Case number (if known) 3:25-bk-10182 Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. П Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Amount of Description and value of any property Date payment Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No X Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was **Address** property transferred payments received or debts made paid in exchange Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) \boxtimes No Yes. Fill in the details. Name of trust **Date Transfer was** Description and value of the property transferred made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. \boxtimes No

Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)

Last 4 digits of account number

Type of account or instrument

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer Case 25-10182-CMG Doc 10 Filed 01/28/25 Entered 01/28/25 13:49:08 Desc Main Document Page 35 of 36

Debtor 1 Ann W. Chan Case number (if known) 3:25-bk-10182 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, Address (Number, Street, City, State and ZIP Code) have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. \Box Value **Owner's Name** Where is the property? Describe the property (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No \boxtimes Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Date of notice Name of site Environmental law, if you Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Court or agency Case Title Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code)

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Debtor 1 Ann W. Chan Case number (if known) 3:25-bk-10182

| Par | t 11 | Give Details About Your Business or G | Connections to Any Business | | | | |
|---|--|---|---|--|--|--|--|
| 27. | 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? □ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation □ No. None of the above applies. Go to Part 12. | | | | | | |
| | Ad | siness Name dress mber, Street, City, State and ZIP Code) | Describe the nature of the business Name of accountant or bookkeeper | Employer Identification number Do not include Social Security number or ITIN. Dates business existed | | | |
| 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial statement to an | | | | | | | |
| I have are to with 18 U | /e re true a b .S.C Anr n W | and correct. I understand that making a | | declare under penalty of perjury that the answers otaining money or property by fraud in connection rs, or both. | | | |
| Dat Did ⊠ N □ Y | y ou lo | January 28, 2025 attach additional pages to Your Stateme | Datent of Financial Affairs for Individuals Filing | g for Bankruptcy (Official Form 107)? | | | |
| \boxtimes N | lo | | an attorney to help you fill out bankruptcy | | | | |